

REACH Advisory Board Meeting
Asian Pacific Community in Action
January 20, 2012

Call to Order/Roll Call

Zeena Mahal called the meeting to order at 10:00AM. She conducted a roll call and sent around the sign-in sheet. The meeting was held without quorum.

Approval of Last Meeting's Minutes

The minutes from the last board meeting were not available for review. Copies of the minutes from the last meeting will be sent out for review through email to all board members.

Introduction of Kimberly Lamar, Epidemiologist

Zipatly Mendoza provided an update on Kimberly Lamar and the recruitment process. Kimberly Lamar is an Epidemiologist recruited by the Arizona Health Disparities Center (AHDC) to help support the REACH project. She accepted the position but then decided not to relocate to Arizona. She is staying in Tennessee. Her husband's relocation to Phoenix fell through. Reyna Edwards is a full-time epidemiologist who is starting in January 30th. She has her masters in epidemiology from the University of Michigan. She will be working on several programs under the HSD including the HealthCheck programs. As Reyna will be covering several projects, the AHDC will recruit another temporary epidemiologist specifically for the REACH project.

Program Manager's Report

Anna Alonzo provided a presentation on the overall project's status. The community health assessment was pulled together based on which health indicators to use from several epidemiologists. If we look at all of the health status report indicators, they will cover the needs for the REACH grant. The indicators include the information that we need and additional data as well. Our goal is to take whatever we develop for Maricopa County, and transfer it to other counties as well. Zeena asked if there was any data on water quality. Zipatly is going to ask her contact at the water authority for that data. Anna mentioned that there were hotspots in the county for toxicity, and that we add the hotspot indicators. Zeena suggested that Zipatly ask her contact about the hotspots as well. Anna mentioned that this is just a draft so if there are additional indicators that need to be added to please let her know.

There is also a budget overview included in the packet. The board members had asked for information on the budget at the last meeting. We are on track with our budget for the program. The project had some savings last year due to the hiring freeze. We requested a carry-over of funds

from the Year 1 budget (\$158,000) to CDC in December. We are expecting to know by March if that request has been approved.

Also included is a copy of the letter from the CDC site visit. She was very complementary in the letter and it was a great demonstration of how getting the board involved in the process is very important.

Also included is a copy of Reyna's resume, the new full-time epidemiologist.

A copy of the rest of the meeting dates for the year is also included; whether we need to meet every month or not will be determined along the way but at least board members can now reserve those dates in their calendars. Melanie Mitros suggested that we meet bi-monthly instead with Anna providing monthly reports to the group. The next meeting would be on March, 16th. We can keep the other meeting dates as tentative dates but plan on having the meetings be bi-monthly.

Two visioning meetings have been held and with the assistance of the Advisory Board and the community participants, a REACH Vision and Values Statement has been developed. Zeenat asked, "What do we mean by "quality of life" in the vision statement?". Melanie Mitros stated that it is possible to have poor healthy but good quality of life. Anna is going to work on an elevator speech related to quality of life and its purpose in our vision statement.

An updated workplan is also in the meeting packets. Everything in green in the work plan has been completed.

Zeenat asked about the Objective 1 on page 6 (to identify other visioning efforts in Arizona by October 2011) and our status. Anna replied that that objective is not highlighted in green because that is an ongoing objective that will not be completed until the end of the project. Zipatly stated that a lot of the grants within the state sound alike and seem alike but the difference with the REACH project is the focus on ethnic and minority populations. We have been collaborating with the Arizona Tobacco and Chronic Disease program to ensure our visions are similar and to promote our program.

Melanie Mitros asked for an update on collaboration with the diabetes program. Anna responded that we attend their diabetes meetings and speak to each other about things going on in the office. Zeenat asked if the diabetes program has any plans to do a specific project with us. Zipatly responded that "They really don't have that much funding". Verna from that department is on our community team but her focus is more with tribal and LGBT populations. Diabetes program as a whole is currently focusing more on the worksite wellness programs. Right now, we are really focusing on increasing our collaboration with the Arizona Bureau of Tobacco and Chronic Disease. Zipatly actively participates in a workgroup for with to insure collaboration.

Taryn Watson and a new pediatrician have been added to our community team.

Anna also included the National Public Health Performance Standards Program. Maricopa is going to take this report and put it into a more easily readable format. That will be a topic that will be posed to the Community Team at the next meeting.

Also attached is a copy of the most current bi-laws. All of the new edits are highlighted in red. Melanie mentioned that under meetings it states that the board shall meet monthly. That language needs to be toned down to state that the board will meet bi-monthly or as needed. Anna agreed to make those changes.

Vice-chair and co-chair are used throughout the bi-laws; we need stick to co-chair for consistency.

Zeenat suggested that we review the statement “If a member fails to attend 2 consecutive meetings an inquiry and the results of the inquiry...” Melanie stated that we need to keep some language in there on required attendance but add a statement of excused absence for emergencies. Zeenat asked that everyone review the by-laws as we need to have them approved at the next meeting.

Doug Hirano asked about section 4 on page 4. Did we change it from 50%? Anna replied “Yes, we changed it from 50% to 4 people”. Doug stated that that will not work because we are redefining quorum as less than 50%. Anna will change it back to 50%.

The yellow form in the packet is the focus group data collection tools and survey. Zipatly noted that we should have separated Hispanic/Latino on the form but it is too late now.

Presentation:

The values for the REACH Vision and Values Statement were developed through input from survey monkey.

Doug commented that “equalizing health conditions” should be changed to “optimizing”. Melanie stated that it is more “improving” than “optimizing”. Doug stated that it is more “optimizing the opportunity for health equity”. Anna will draft a new value statement for the Health Equity value and will resubmit it to the board, changing the word “equalizing”.

Advisory Board: When advisory board members leave, we have 3 months to replace them. Aphreikah Duhaney is no longer with the Gila River Health Care and will no longer participate on the board. Anna has a meeting with her replacement next week, Renee Manda, Chief Nurse at Gila River Health Care. Zipatly recommended Dr. Krishnaswami Vijayaraghavan. He is a cardiologist and is on the National Partnership for Action to End Health Disparities. Anna has not approached him yet because she wanted to talk to the board first. Melanie stated, and the board members agreed, that if he is interested; he would add a lot of clout to the group.

Visioning: We have created the vision and values statements. We are going to develop set meeting dates for the community team. We want their input on several things including the type of information they would like to see and how that information should be presented to them. We will be doing policy training in August. We would like to find out what type of training would be helpful for them. We will be creating a communication subcommittee and a data subcommittee.

Local Public Health Assessment: The Maricopa County Department of Health has completed the assessment and submitted their report to CDC. We would like to know from the advisory board how this information should be presented. There will be a meeting on Monday between the state, county and community partners on how to share data and the best ways to communicate data between organizations. ASU got a really big [grant from Piper](#). There may be an opportunity to partner with them.

Community Themes and Strengths Forces of Change:

We are contracting with KCA (Dolores Rentana) to facilitate the 16 focus groups. Doug has a contractor that will be translating all of the focus group materials into 4 different languages (Chinese, Japanese, Vietnamese and Korean) for the Asian Pacific group.

The surveys and focus groups are up and running. To date, 3 focus groups have been held and 2 survey sessions have been conducted. There is actually one focus group up and running in the African American community in Maryvale. The goal is to have all of the focus groups completed by February. Anna attended one focus group last night and it was really eye opening.

Community Health Assessment:

We have drafted a document that identifies our target health indicators.

Doug commented on data piece and the use of info-graphics which is a combination of art and skill. He thinks that would be a better presentation of the data instead of standard bar charts. Anna is going to share the link to [reach out and read \(annual report\)](#). Anna turned it into a Golden Book. Doug said that if there is left over money it might be worth it to hire a consultant to develop some info-graphics for our data.

Community Action Plan:

The big community meeting with about 200 participants will be in May. We will discuss 2-3 issues and ways to tackle those issues. Doug asked if we would finish an action plan that day or if we would need subsequent meetings. Anna stated that they hoped to finish it that day. Doug thinks that we could get a good overview done that day and recruit some key partners but we may need to consider another process to develop more detailed objectives.

Budget:

We are on target with our budget. We will have some additional funds in our personnel line due to the hiring freeze. We also have some carry over funds from Year 1 (\$158,000). We are looking to

use \$28,000 hire a media firm to develop tool kits and to help with translating materials. We will find out soon whether or not that has been approved.

Other:

We have to request to CDC to actually contract with anyone. The multicultural media and design company will help with design and promotion of the program. They will also help with the development of a toolkit. Melanie's concern with toolkits is how they will be updated. They are a good idea but there is always a question of how will the updated be disseminated. Zeenat suggested that a good way to eliminate that problem would be to have electronic toolkits that organizations can customize and make their own updates.

Doug Hirano commented on the need to make sure that policy training is more than just bringing people together for coaching. There should be a focus on creating some kind of objective and running it from beginning to end. We are planning on doing something similar for local health offices and local decision makers on coalition building, grantwriting, evaluation and assessments. Melanie suggested that we take the coalition building a step further and work on developing functioning and active coalitions.

New Business

Upcoming events – ongoing focus groups, survey sessions and community team meetings

Other new business – no new business was mentioned

Meeting dates

March 16th. Really need to approve the bi-laws at the next meeting. It will be at APCA. Included in the meeting reminder that a new year started and that board members need to attend a certain amount of meetings a year and can attend by phone. Melanie offered to set up an online meetings site for us if board members need to attend online.

Adjournment – The meeting was officially adjourned by Zeenat at 12:00pm.

Next Board Meeting, March 16, 2012 from 10:00AM to 12:00PM at the Asian Pacific Community in Action.